

**SINGLE ASSIGNEE
CASE SPECIFIC POWER OF ATTORNEY**

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM and STATEMENT UNDER 37 CFR 3.73(b)	Application or Control Number	09/826,157
	Filing Date	April 4, 2001
	First Named Inventor	John J. HART
	Title:	METHOD AND SYSTEM FOR DATA DELIVERY AND REPRODUCTION
	Attorney Docket Number: 353341US8	

I hereby appoint:

☒ Practitioners associated with the Customer Number

22850

as my/our attorney(s) or agent(s) to prosecute the application/reexamination proceeding identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application/reexamination proceeding to:

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I am the:

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

SCA IPLA HOLDINGS INC.

(Name of Assignee)

, a Corporation

(Type of Assignee, e.g., corporation, partnership, government agency, etc.)

☒ States that it is the assignee of the entire right, title, and interest.

A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: John J. Hart, III; Richard B. LeVine; Andrew R. Lee; Daniel G. Howard To: ECD Systems.com, Inc.

The document was recorded in the United States Patent and Trademark Office at

Reel 021591, Frame 0486, or for which a copy therefore is attached.

2. From: John J. Hart, III; Richard B. LeVine; Daniel G. Howard; Andrew R. Lee To: ECD Systems, Inc.

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3. From: ECD Systems, Inc. To: SCA IPLA Holdings Inc.

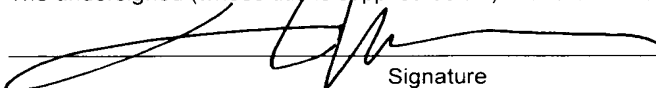
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As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

SIGNATURE OF ASSIGNEE OF RECORD

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.



Signature

Toshimoto Mitomo

Printed or Typed Name

President

Title

3/2/2010

Date

201-930-7217

Telephone Number

THIS FORM CAN ONLY BE SIGNED WHERE THERE IS ONLY A SINGLE ASSIGNEE